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December 29, 2005

FACSIMILE COVER SHEET

Page 1 of 17

TO: Mail Stop Amendment Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450	RE: Application No. 10/735,446 Filed: December 12, 2003
TELEPHONE: (571) 272-2952 Examiner: Jared W. Newton	FACSIMILE: (571) 273-8300

MESSAGE

The following documents are submitted with this Cover Sheet:

Reply to Office Action Mailed October 17, 2005
Transmittal Sheet (in duplicate)

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PLEASE CONFIRM THE SAFE RECEIPT OF THIS TRANSMISSION

Attorney's Reference: TN329

In re the Application of: Seunghyun YOON, et al.

Application No.: 10/735,446

Filed: December 12, 2003

For: SPACE-SAVING MOUNTING FIXTURE FOR USE WITH AN EQUIPMENT RACK

Mail Stop Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450**RECEIVED
CENTRAL FAX CENTER
DEC 29 2005**

Sir:

Transmitted herewith is a Reply for the above-identified application.

- ☐ Small entity status of this application under 37 C.F.R. §1.9 and §1.27 has previously been established.
- ☐ A statement to establish small entity status under 37 C.F.R. §1.9 and §1.27 is enclosed.
- ☒ No additional fee for claims is required.

	(Col. 1)		(Col. 2)		(Col. 3)	SMALL ENTITY		OTHER THAN SMALL ENTITY
	CLAIMS AFTER AMENDMENT		HIGHEST NO. PREVIOUSLY PAID FOR		PRESENT EXTRA	ADDITIONAL FEE	OR	ADDITIONAL FEE
TOTAL	29	MINUS	29	=	0	x 25 = \$	x	50 = \$
INDEPENDENT	3	MINUS	3	=	0	x 100 = \$	x	200 = \$
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						+ 180 = \$		+ 360 = \$
						TOTAL = \$	OR	TOTAL = \$

- ☐ It is hereby petitioned for an extension of time in accordance with 37 C.F.R. §1.136(a). The appropriate fee required by 37 C.F.R. §1.17 is calculated as shown below.

Small Entity

Response filed within:

- ☐ first - \$ 60.00
- ☐ second - \$225.00
- ☐ third - \$510.00
- ☐ fourth - \$795.00

month after time period set

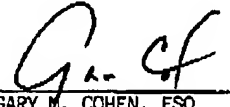
Other than Small Entity

Response filed within:

- ☐ first - \$ 120.00
- ☐ second - \$ 450.00
- ☐ third - \$1,020.00
- ☐ fourth - \$1,590.00

month after time period set

- ☐ Please charge my Deposit Account No. 03-2405 in the amount of \$_____. A duplicate copy of this sheet is attached.
- ☐ A check in the amount of \$_____ is attached.
- ☒ The Commissioner is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account No. 03-2405. A duplicate copy of this sheet is attached.
- ☒ Any filing fees under 37 C.F.R. §1.16 for the presentation of extra claims.
- ☒ Any patent application processing fees under 37 C.F.R. §1.17.

December 29, 2005
(date)

 GARY M. COHEN, ESQ.
 Reg. No. 28,834
 Attorney for Applicants
 Telephone: (610) 975-4430

Attorney's Reference: TN329

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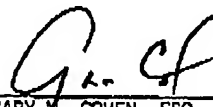
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